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J0682 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL

(for nonprovisional applications under 37 C.F.R. § 1.53(b))

Attorney Docket No.

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EL 800842484

TO: Box Patent Application
Commissioner for Patents
Washington, D.C. 20231

J0978 U.S. PTO

09/981248



10/16/01

Inventor(s): Mark A. Hoffman and David P. McCallie, Jr.

Title: COMPUTER SYSTEM FOR PROVIDING INFORMATION ABOUT THE RISK OF AN ATYPICAL CLINICAL EVENT
BASED UPON GENETIC INFORMATION

Enclosed are:

- ☒ 44 pages of specification including abstract
- ☒ 6 sheets of drawings
- ☒ an assignment of the invention to: Cerner Corporation
- ☒ Declaration of Inventor(s): ☒ Newly executed ☐ Copied from a prior application (for contin/div)
- ☐ Incorporation by Reference: the entire disclosure of the prior application, from which the copy or copies of the oath or declaration is supplied, is considered to be part of the disclosure of the accompanying application and is hereby incorporated by reference therein.
- ☐ small entity status is claimed.
- ☐ a small entity status was claimed or filed in prior application; status still proper and desired.
- ☐ Information Disclosure Statement/PTO-1449/Copies of IDS citations.
- ☐ other:

If a Continuing Application: Check appropriate box, and supply the requisite information below:

| | | | |
|---------------------------------------|-------------------------------------|-----------------------------------------------------|--------------------------|
| <input type="checkbox"/> Continuation | <input type="checkbox"/> Divisional | <input type="checkbox"/> Continuation-in-Part (CIP) | of prior application No. |
| Prior application information: | | Examiner: | Group Art Unit: |

CLAIMS AS FILED

| | NUMBER FILED | NUMBER EXTRA | RATE | FEE |
|--------------------------------------------------------------------------------------------------------------------|--------------|--------------|---------|-----------------------|
| BASIC FEE | | | \$740 | \$ 740 |
| TOTAL CLAIMS | 90 - 20 = | 20 | X \$ 18 | \$1260 |
| INDEPENDENT CLAIMS | 9 - 3 = | 6 | X \$ 84 | \$ 504 |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | \$270 | \$ |
| * Number extra must be zero or larger | | | | TOTAL \$2504 |
| If applicant has small entity status under 37 CFR 1.9 and 1.27, then divide total fee by 2, and enter amount here. | | | | SMALL ENTITY TOTAL \$ |

- ☒ A check in the amount of \$2,504.00 to cover the filing fee is enclosed.
- ☒ Commissioner is hereby authorized to charge/credit Deposit Acct. No. 19-2112 as described below. Enclosed is a duplicate of this sheet.
- ☐ Charge the amount of \$_____ as filing fee.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing fees required under 37 CFR 1.16 and 1.17.

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